



☒ PATENT ☐ DESIGN B&W Ref. 005127.00285 Date 3/24/04 ✓
☐ HAND CARRY Group/Section _____ Bldg _____ Rm _____
Serial/Patent No. 101781328 Atty/Sec WFR/dah
Inventor Scott Hull Client Mike Inc.
Title Footwear and other Foot-Receiving Devices
Including A Removable Closure System Cover member

The following has been received in the U.S. Patent and Trademark Office on the date stamped hereon:

<input type="checkbox"/> Total pp Spec. including: # of Claims _____	<input type="checkbox"/> Sequence Listing: <input type="checkbox"/> Diskette <input type="checkbox"/> Paper
<input type="checkbox"/> # of independent claims _____ <input type="checkbox"/> Abstract	<input type="checkbox"/> Amendment <input type="checkbox"/> Response: OA dd _____
<input type="checkbox"/> Drawings: <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Petition for Extension of Time until _____
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<input type="checkbox"/> Declaration/Power of Attorney: <input type="checkbox"/> Executed <input type="checkbox"/> Unexecuted	<input type="checkbox"/> Request for Approval of Drawing Changes
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<input type="checkbox"/> Priority Claim (Foreign or U.S. Provisional: B&W # _____)	<input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Patent Copies (# ordered _____)
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Country _____ Appl. # _____ Date _____	<input type="checkbox"/> Amendment under 37 CFR 1.312
<input checked="" type="checkbox"/> w/Foreign Priority Document(s)	<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Application: <input type="checkbox"/> CIP <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional	<input type="checkbox"/> Transmittal <input type="checkbox"/> Fee Transmittal w/Auth. to Charge Deposit Acct.
Parent Ser. No. _____ B&W# _____	<input type="checkbox"/> Certificate of Mailing
<input type="checkbox"/> U.S. Provisional _____ pp Spec/Claims, Cover Sheet	<input type="checkbox"/> Check # _____ for \$ _____
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3

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B&W Rev 5/01

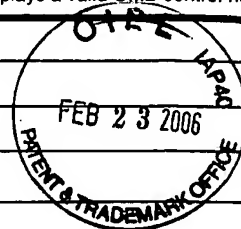
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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

Complete if Known

Application Number 10/781,328
Filing Date February 19, 2004
First Named Inventor N. Scot Hull
Examiner Name Marie D. Patterson
Art Unit 3728
Attorney Docket No. 005127.00285



☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,400.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : _____
☒ Deposit Account Deposit Account Number: 19-0733 Deposit Account Name: Banner & Witcoff, LTD.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

Under 37 CFR 1.16 and 1.17
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	\$
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

<u>Fee Description</u>				<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (including Reissues)				50	25
Each independent claim over 3 (including Reissues)				200	100
Multiple dependent claims				360	180
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
38	- 38 or HP= 0	x 50	= \$.00	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
HP = highest number of total claims paid for, if greater than 20.					
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>		
11	- 4 or HP= 7	x 200	= \$ 1,400.00		
HP = highest number of independent claims paid for, if greater than 3.					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = 0 / 50 =		(round up to a whole number) x	.00	=

4. OTHER FEE(S)

Other (e.g., late filing surcharge) : _____

SUBMITTED BY

Signature: William F. Rauchholz Registration No. 34,701 Telephone 202.824.3000
Name (Print/Type) William F. Rauchholz Date 2/23/06

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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